

02/08/01



1003 U.S. PTO

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A

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SB/05

(11-00)

JCS

7/19/24

02/08/01

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Approved for use through 10/31/2002. OMB 0651-0001

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	13148RRUS01U (22171.262)
First Inventor	Rajesh Amin
Title	ACCOUNTING MANAGEMENT SUPPORT BASED ON QOS IN AN IP CENTRIC DISBRIBUTED NETWORK
Express Mail Label No.	EL607325878US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **48**]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **9**]
5. Oath or Declaration [Total Pages **4**]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35  
or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_ / \_\_\_\_\_

Prior application information:

Examiner \_\_\_\_\_

Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach Bar Code Label Here)

or ☐

Correspondence address below

Name	David L. McCombs				
Address	Haynes and Boone LLP 901 Main Street, Suite 3100				
City	Dallas	State	TX	Zip Code	75202-3789
Country	USA	Telephone	(214) 651-5533	Fax	(214) 651-5941

Name (Print/Type)	Ruben C. DeLeon	Registration No. (Attorney/Agent)	37,812
Signature		Date	2/9/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ 2,820.00)**Complete if Known**

Application Number	n/a
Filing Date	Herewith
First Named Inventor	Rajesh Amin
Examiner Name	n/a
Group Art Unit	n/a
Attorney Docket No.	13148RRUS01U (22171.262)

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge
- 
- Indicated fees and credit any overpayments to:

Deposit Account Number	08-1394
Deposit Account Name	Haynes and Boone LLP

☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17☐ Applicant claims small entity status.  
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money  
Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1)** (\$ 710.00)**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
135	-20** = 115.4	18	2,070.4
3	-3** = 0.00	80	0.00
			0.00

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ 2,070.00)

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 40.00)**SUBMITTED BY**

Name (Print/Type)	Ruben E. DeLeon
Signature	

Registration No. (Attorney/Agent)	37,812
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**Complete (if applicable)**

Telephone	(214) 651-5544
Date	2/8/01

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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D853587

Variable	Mean	SD	Min	Max
Age	31.2	5.8	18	45
Gender	50% Male			
Education	12.5	1.2	10	15
Income	\$25,000	\$10,000	\$10,000	\$40,000
Marital Status	60% Married			
Employment	75% Employed			
Health Status	80% Good			
Stress Level	65	15	40	90
Sleep Quality	70	10	50	90
Exercise Frequency	3 times/week			
Dietary Habits	70% Healthy			
Alcohol Consumption	2 drinks/week			
Tobacco Use	10% Smoker			
Family Size	2.5	1.0	1	4
Home Ownership	85% Owner			
Commute Time	25 minutes	10 minutes	10	45
Work Satisfaction	60	20	30	90
Life Satisfaction	75	15	50	95
Overall Well-being	70	10	50	90

§ § § § § § §

Group Art Unit: Unknown

Examiner: Unknown

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# EXPRESS MAIL CERTIFICATE

Date of Deposit: February 8, 2001

1. Utility Patent Application Transmittal Sheet (in duplicate);
2. Fee Transmittal Sheet (in duplicate)
3. Patent Application consisting of: 48 pages of Specification, 135 Claims, 1 page of Abstract;
4. 9 Drawing sheets;
5. Check in the amount of \$2820.00 for filing fees (\$2780 for patent filing fees and \$40.00 for assignment recordation fee);
6. Assignment and Assignment Recordation Cover Sheet; and
7. Return Postcard.

are being deposited with United States Postal Service “Express Mail Post Office to Addressee” to the Commissioner for Patents, Box Patent Application, Washington, D. C. 20231.

Typed or Printed Name

Signature